Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 1 of 59

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | 't 1: | Identify Yourself | | |
|-----|--|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Write | e the name that is on | Star | |
| | pictu | government-issued ire identification (for nple, your driver's | First name | First name |
| | licer | se or passport). | Middle name | Middle name |
| | | g your picture | Mix | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number | xxx-xx-0617 | |
| | | | | |

Entered 04/06/18 11:20:09 Page 2 of 59 Case 18-10093 Doc 1 Filed 04/06/18 Desc Main

Document Case number (if known) Debtor 1 Star Mix

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|----|--|---|--|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | | |
| | | EINS | EINs | | | |
| 5. | Where you live | 3341 184th St Unit 1B | If Debtor 2 lives at a different address: | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 3 of 59

Debtor 1 Star Mix Document Page 3 of 59 Case number (if known)

| ar | Tell the Court About | our E | Bankruptcy Ca | ise | | | | | | |
|-----|---|-----------|----------------|------------------------------------|--|---------------|----------------------|---|--------------------|--------------------------------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>N</i> of page 1 and ch | | | 342(b) for Individua | ls Filing for Bar | kruptcy |
| | choosing to file under | Chapter 7 | | | | | | | | |
| | | | Chapter 11 | | | | | | | |
| | | | Chapter 12 | | | | | | | |
| | | | Chapter 13 | | | | | | | |
| | | | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is sub | oically, if you are | paying the | fee yourself, you n | erk's office in your long and pay with cash, or rney may pay with a | cashier's check | , or money |
| | | | | | tallments. If you | | s option, sign and | attach the Applicati | on for Individua | ls to Pay |
| | | | | | | | | are filing for Chapte | | |
| | | | applies to you | ur family size a | nd you are unab | le to pay the | e fee in installment | less than 150% of s). If you choose thi 3B) and file it with you | s option, you m | erty line that ust fill out |
|). | Have you filed for bankruptcy within the last 8 years? | ■ N | | | | | | | | |
| | | | District | | | When | | Case number | | |
| | | | District | | | When | | Case number | | |
| | | | District | | | When | | Case number | | |
| | | | | | | | | _ | | |
| 10. | Are any bankruptcy cases pending or being | ■ N | 0 | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ΠY | es. | | | | | | | |
| | | | Debtor | | | | | Relationship to you | u | |
| | | | District | | | When | | Case number, if kr | nown | |
| | | | Debtor | | | | | Relationship to you | u | |
| | | | District | | | When | | Case number, if kr | nown | |
| 11. | Do you rent your | N | o. Go to I | ine 12. | | | | | | |
| | residence? | ■ Y | es. Has yo | our landlord obt | ained an eviction | n judgment a | against you? | | | |
| | | · | . | No. Go to line | 12. | | | | | |
| | | | - | | nitial Statement / | About an Ev | iction Judgment A્ | gainst You (Form 10 | 01A) and file it v | vith this |
| | | | | p.c., po | | | | | | |

Document Page 4 of 59 Case number (if known) Debtor 1 Star Mix Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

Debtor 1 Star Mix Document Page 5 of 59 Case number (if known)

Part 5: Ex

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 6 of 59

| Deb | tor 1 | Star Mix | | | ————— | Case n | umber (if known) | | | |
|------|---|--|---------------------|--|--|---|-----------------------------|---|--|--|
| Part | 6: | Answer These Questi | ons for Re | porting Purposes | | | | | | |
| 16. | | t kind of debts do have? | 16a. | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § individual primarily for a personal, family, or household purpose." | | | | | | |
| | | | | ☐ No. Go to line 16b. | | | | | | |
| | | | | Yes. Go to line 17. | | | | | | |
| | | | 16b. | | | s debts? Business debts are debts that you incurred to obtain or through the operation of the business or investment. | | | | |
| | | | | □ No. Go to line 16c. □ Yes. Go to line 17. | | | | | | |
| | | | | | | | | | | |
| | | | 16c. | State the type of debts | you owe that are not cor | nsumer debts or bu | usiness debts | | | |
| 17. | | you filing under pter 7? | □ No. | I am not filing under Chapter 7. Go to line 18. | | | | | | |
| | after | rou estimate that any exempt perty is excluded and | Yes. | | er 7. Do you estimate that be available to distribute | | | and administrative expenses | | |
| | adm | inistrative expenses paid that funds will | | ■ No | | | | | | |
| | be available for distribution to unsecured creditors? | | | ☐ Yes | | | | | | |
| 18. | How many Creditors do you estimate that you | | 1 -49 | | ☐ 1,000-5,0 | | ☐ 25,001- | | | |
| | owe | | ☐ 50-99 ☐ 100-19 | 00 | □ 5001-10, □ 10,001-2 | | ☐ 50,001- ☐ More th: | • | | |
| | | | 200-99 | - | _ 10,001 2 | .5,000 | _ more un | | | |
| 19. | | much do you | □ \$0 - \$5 | 50,000 | | 01 - \$10 million | □ \$500,00 | 0,001 - \$1 billion | | |
| | | estimate your assets to be worth? | | 1 - \$100,000 | | 001 - \$50 million 001 - \$100 million | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | |
| | | | | 01 - \$500,000 01 - \$1 million | | 0,001 - \$500 million | | an \$50 billion | | |
| 20. | | much do you | □ \$0 - \$5 | 50,000 | □ \$1,000,0 | 01 - \$10 million | □ \$500,00 | 0,001 - \$1 billion | | |
| | estir to be | nate your liabilities e? | | 01 - \$100,000 | | 001 - \$50 million | | \$1,000,000,001 - \$10 billion | | |
| | | | _ | 01 - \$500,000 01 - \$1 million | | 001 - \$100 million 0,001 - \$500 millior | | 0,000,001 - \$50 billion nan \$50 billion | | |
| Part | 7: | Sign Below | | | | | | | | |
| For | you | | I have exa | amined this petition, and | I declare under penalty | of perjury that the | information provided is | s true and correct. | | |
| | | | | | pter 7, I am aware that I the relief available unde | | | | | |
| | | | | | I did not pay or agree to ead the notice required by | | | elp me fill out this | | |
| | | | I request | relief in accordance with | the chapter of title 11, L | Inited States Code | e, specified in this petiti | on. | | |
| | | | | y case can result in fine | ment, concealing proper s up to \$250,000, or imp | | | ud in connection with a U.S.C. §§ 152, 1341, 1519, | | |
| | | | Star Mix | | | Signature of D | Debtor 2 | | | |
| | | | - | | | Evacuted | | | | |
| | | | Executed | on April 5, 2018 MM / DD / YYYY | | Executed on | MM / DD / YYYY | | | |
| | | | | = = , | | | = | | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 7 of 59

Debtor 1 Star Mix Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Julie M Gleason | Date | April 5, 2018 | |
|--|---------------|--------------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| India M. Olassan COZOFOC | | | |
| Julie M Gleason 6273536 | | | |
| Printed name | | | |
| Gleason & Gleason | | | |
| Firm name | | | |
| 77 W Washington, Ste 1218 | | | |
| Chicago, IL 60602 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone (312) 578-9530 | Email address | troy@chicagobk.com | |
| 6273536 IL | | | |
| Bar number & State | | | |

| | First Name | Middle Name | Last Name | |
|---|------------|-------------------|-------------|--|
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|-------------|---------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 86,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 6,580.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 92,580.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 94,329.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 177,302.00 |
| | Your total liabilities | \$ | 271,631.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,082.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,078.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other so | chedules. |
| 7. | Yes What kind of debt do you have? | | |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Entered 04/06/18 11:20:09 Filed 04/06/18 Desc Main Case 18-10093 Doc 1 Document

Page 9 of 59 Case number (if known) Debtor 1 Star Mix

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form | |
|----|--|----|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$ |

4,985.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total c | laim |
|--|---------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 86,419.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 86,419.00 |

| | | Case 18-10093 | Doc 1 | | 04/06/18 ument | Entered 04/06/18 | 3 11:20:09 | Desc | Main |
|---------------------|---|--|---------------------------------------|----------------------------|--|--|----------------------|---------------|--|
| Fill | in this in | ormation to identify ye | our case and th | | | 1 800 10 01 33 | | | |
| | otor 1 | Star Mix | | | | | | | |
| Dah | otor O | First Name | Middle | e Name | | Last Name | | | |
| | otor 2 use, if filing) | First Name | Middle | e Name | | Last Name | | | |
| Unit | ted States | Bankruptcy Court for th | e: NORTHER | N DISTF | RICT OF ILLIN | IOIS | | | |
| Cas | se number | | | | | - | | | Check if this is an amended filing |
|)f | ficial F | Form 106A/B | | | | | | | S |
| _ | | ule A/B: Pro | perty | | | | | | 12/15 |
| nink nfor nsv | t it fits best mation. If it wer every o | . Be as complete and according to the space is needed, att | curate as possibl ach a separate s | le. If two r heet to th | married people is form. On the | n asset fits in more than one of eare filing together, both are eart top of any additional pages, w | qually responsibl | le for supply | ying correct |
| | Yes. Whe | ere is the property? | | | | | | | |
| 1.1 | | | | What | is the property | ? Check all that apply | | | |
| | 3341 184th St Unit 1B Street address, if available, or other description | | | | On Duplex or multi-unit building | | | | or exemptions. Put aims on <i>Schedule D:</i> Secured by Property. |
| | | | | | | or mobile home | Current value of | the C | urrent value of the |
| | Homew | rood IL | 60430-0000 | | Land | | entire property? | p | ortion you own? |
| | City | State | ZIP Code | | Investment pro Timeshare | pperty | \$86,00 | 0.00_ | \$86,000.00 |
| | | | | | Other | | | | ownership interest y by the entireties, or |
| | | | | Who h | nas an interest | in the property? Check one | a life estate), if k | | y by the chareacs, or |
| | | | | | Debtor 1 only | | | | |
| | Cook | | | | Debtor 2 only | | | | |
| | County | | | | Debtor 1 and D | | ☐ Check if this | s is commu | nity property |
| | | | | | | the debtors and another | (see instruction | ns) | |
| | | | | | information your rty identification | ou wish to add about this item, on number: | such as local | | |
| | | | | | | | | | |
| | | | | | | | | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$86,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| otor 1 Star Mix | Document Page 11 of 59 Case number (if know | /n) |
|--|--|---|
| ars, vans, trucks, trac | ors, sport utility vehicles, motorcycles | |
| l No | | |
| Yes | | |
| | | |
| Make: Lincoln | | secured claims or exemptions. Put |
| Model: MKZ | | any secured claims on Schedule D: Have Claims Secured by Property. |
| Year: 2017 | Debtor 2 only Current value | of the Current value of the |
| Approximate mileage: | Debtor 1 and Debtor 2 only entire propert | y? portion you own? |
| | At least one of the debtors and another | |
| LEASING | Check if this is community property (see instructions) | \$0.00 |
| l _{Yes} Add the dollar value of | | \$0.00 |
| 3: Describe Your Perso | nal and Household Items | |
| | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E <i>xamples:</i> Major applian ☑ No – | | |
| _ 100. D00011B0 | | |
| | Misc. Household Goods (Bedroom Furniture, Kitchen Appliances, tables, chairs, sofas) | \$1,000.00 |
| Examples: Televisions a including cell No | | c collections; electronic devices |
| | Consumer Electronics (Including Televisions, Radios, Computers, Games, Phones, Stereos) | \$200.00 |
| Examples: Antiques and other collection | | oin, or baseball card collections; |
| | | |
| Examples: Sports, photo | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cano | es and kayaks; carpentry tools; |
| | Cars, vans, trucks, tract No Yes Make: Lincoln Model: MKZ Year: 2017 Approximate mileage: Other information: LEASING Vatercraft, aircraft, mot xamples: Boats, trailers, No Yes Add the dollar value of pages you have attached ages you have attached ages you have any lead to be pages. Major applian No Yes. Describe Collectibles of value Examples: Antiques and other collection of the collection of | Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for bages you have attached for Part 2. Write that number here |

| Debtor 1 | Star Mix | | D | ocument | Page 1 | 2 01 59 Case | number (if known) | |
|---|-------------------|-------------|--|------------------|--------------------|------------------|-----------------------|---|
| | | es, shotgu | ns, ammunition, and | related equipme | ent | | | |
| ■ No □ Yes. | Describe | | | | | | | |
| □ No | | lothes, fur | rs, leather coats, desi | gner wear, shoe | es, accessorie | s | | |
| | | Used | Clothing | | | | | \$200.00 |
| □ No | | ewelry, co | stume jewelry, engag | ement rings, we | edding rings, h | eirloom jewelry, | watches, gems, g | old, silver |
| | | Misc. | Costume Jewelry | | | | | \$50.00 |
| Exam No □ Yes. 14. Any of □ No □ Yes. | Give specific in | nd house | hold items you did r | | | | | |
| | | | your entries from Pa here | | | | ave attached | \$1,450.00 |
| | escribe Your Fina | | equitable interest in | any of the follo | wing? | | | Current value of the |
| Do you or | wil of have any | legal of e | quitable interest in | any or the folio | willy: | | | portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | , | | our wallet, in your ho | · | | d on hand when y | ou file your petition | on |
| | | | | | | Ca | ash on Hand | \$30.00 |
| Exam _i □ No | | | r other financial acco ve multiple accounts | | nstitution, list o | | iions, brokerage h | nouses, and other similar |
| | | 17.1. | Citibank | Checkin | ng Account | [Negative] | | \$0.00 |
| | | 17.2. | Bank of Americ | a Chase | | | | \$100.00 |
| | | 17.4. | Dank of Amend | | | | | Ψ.50.00 |

Official Form 106A/B

| | Ca | ase 18-10093 | Doc 1 | | Entered 04/06/18 11:20:09 | Desc Main |
|-----|-------------------------------------|---|-------------------------------|--|---|---|
| De | ebtor 1 Sta | r Mix | | Document | Page 13 of 59 Case number (if known) | |
| 18. | | ial funds, or publicl ond funds, investme | | cks rith brokerage firms, mor | ney market accounts | |
| | ■ No □ Yes | | nstitution or is | ssuer name: | | |
| | | | nterests in ir | ncorporated and uninc | orporated businesses, including an interes | t in an LLC, partnership, and |
| | joint ventur | | | · | , , | ,, ,, |
| | | specific information a Nam | about them ne of entity: | | % of ownership: | |
| | Negotiable i Non-negotia ■ No | nstruments include pe ble instruments are tl | ersonal check nose you can | | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| | Li Yes. Give | specific information a Issu | er name: | | | |
| | | or pension accounts terests in IRA, ERIS | | 1(k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | plans |
| | Yes. List e | ach account separate Type o | ely. f account: | Institution r | name: | |
| | | | | Pension v | with County- 100% exempt | \$5,000.00 |
| | Your share | greements with land | you have ma | rent, public utilities (elec | tinue service or use from a company ctric, gas, water), telecommunications compan | ies, or others |
| | , | contract for a period | ic payment of | money to you, either for | r life or for a number of years) | |
| | ■ No □ Yes | . Issuer name | and descript | ion. | | |
| 24. | | n education IRA, in 530(b)(1), 529A(b), a | | | ogram, or under a qualified state tuition pro | gram. |
| | ☐ Yes | . Institution na | ame and desc | cription. Separately file th | ne records of any interests.11 U.S.C. § 521(c): | |
| | ■ No | | | erty (other than anythin | g listed in line 1), and rights or powers exe | rcisable for your benefit |
| | | specific information a | | | and recomments. | |
| | Examples: II ■ No | iternet domain name | s, websites, p | ets, and other intellecture or coeeds from royalties a | and licensing agreements | |
| | | specific information a | | u milata a | | |
| | | anchises, and other uilding permits, exclu | | | n holdings, liquor licenses, professional license | es |
| | | specific information a | about them | | | |
| Mo | oney or prope | rty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |

| Б. | . | Case 18-10093 | Doc 1 | Filed 04/06/18 Document | Entered 04/06/18 11:20:09 Page 14 of 59 | Desc Main |
|-----|------------------|---|--------------------------------|----------------------------|---|----------------------------|
| De | btor 1 | Star Mix | | | Case number (if known) | |
| | Tax refu ■ No | unds owed to you | | | | |
| | | Give specific information a | bout them, inc | cluding whether you alre | ady filed the returns and the tax years | |
| | ■ No | • • | , | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| ı | Examp | mounts someone owes les: Unpaid wages, disabil benefits; unpaid loans Give specific information | ity insurance s you made to | | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | | s in insurance policies les: Health, disability, or lif | e insurance; I | health savings account (| HSA); credit, homeowner's, or renter's insuran | ce |
| İ | ■ Yes. N | Name the insurance comp Com | any of each p npany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| | | | m Life Insu ployer - No | rance Policy w/ CSV | | \$0.00 |
| _ | someor No | ne has died. Give specific information | | | surance policy, or are currently entitled to rece | |
| 1 | Examp ■ No | against third parties, wh | nt disputes, in | | t or made a demand for payment to sue | |
| | Other c ■ No | ontingent and unliquida | ted claims of | every nature, including | g counterclaims of the debtor and rights to | set off claims |
| ı | ☐ Yes. | Describe each claim | | | | |
| ı | No | ancial assets you did no | | | | |
| 36. | | | | | ny entries for pages you have attached | \$5,130.00 |
| Par | rt 5: Des | cribe Any Business-Related | l Property You | Own or Have an Interest | n. List any real estate in Part 1. | |
| | _ | wn or have any legal or equ to Part 6. | itable interest | in any business-related p | roperty? | |
| | Yes. G | o to line 38. | | | | |
| Par | | scribe Any Farm- and Comm ou own or have an interest in f | | | n or Have an Interest In. | |
| 46. | Do you | own or have any legal o | r equitable ir | nterest in any farm- or o | commercial fishing-related property? | |

No. Go to Part 7.

Schedule A/B: Property

Official Form 106A/B

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 15 of 59 Case number (if known) Debtor 1 **Star Mix** ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$86,000.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$1,450.00 Part 4: Total financial assets, line 36 \$5,130.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$6,580.00 \$6,580.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$92,580.00

Official Form 106A/B Schedule A/B: Property page 6

| | | | | , |
|---------------------|--------------------------|-------------------|-------------|---|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Star Mix | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exen |
|---|
|---|

| 1. | Which set of exemptions ar | e vou claiming | ? Check one only. | even if your s | pouse is filing with you |
|----|--------------------------------|-------------------|------------------------|------------------|--------------------------|
| ٠. | William Set of exclinations at | c you olullilling | · Official officially, | CVCII II y Cui O | podoo io illing with you |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | Current value of the portion you own | Amo | Specific laws that allow exemption | |
|---|--------------------------------------|-----|---|-----------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 3341 184th St Unit 1B Homewood, IL 60430 Cook County | \$86,000.00 | | | 735 ILCS 5/12-901 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2017 Lincoln MKZ LEASING | \$0.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc. Household Goods (Bedroom Furniture, Kitchen Appliances, | \$1,000.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| tables, chairs, sofas) Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used Clothing Line from Schedule A/B: 11.1 | \$200.00 | | 100% | 735 ILCS 5/12-1001(a) |
| Line from Goriodale 772. TTT | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc. Costume Jewelry Line from Schedule A/B: 12.1 | \$50.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| Line from Goriodale PVD. 1211 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 17 of 59

Debtor 1 Star Mix Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash on Hand 735 ILCS 5/12-1001(b) \$30.00 \$0.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Citibank: Checking Account 735 ILCS 5/12-1001(b) \$0.00 \$0.00 [Negative] Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Bank of America: Chase 735 ILCS 5/12-1001(b) \$100.00 \$0.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Pension with County- 100% exempt 735 ILCS 5/12-1006 100% \$5,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

| | Document | Page 18 of | 59 | | |
|---|--|--------------------|------------------------------------|--|-------------------|
| Fill in this information to identify yo | our case: | | | | |
| Debtor 1 Star Mix | | | | | |
| First Name | Middle Name | Last Name | | - | |
| Debtor 2 | Middle Mana | Last Name | | - | |
| (Spouse if, filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the | e: NORTHERN DISTRICT OF ILLII | NOIS | | _ | |
| O a a a susuala a a | | | | | |
| Case number (if known) | | | | ☐ Check | if this is an |
| | | | | | led filing |
| | | | | | .oug |
| Official Form 106D | | | | | |
| Schedule D: Creditor | s Who Have Claims S | Secured h | v Propert | V | 12/15 |
| Scriedale B. Creditor | s who have claims c | becured b | y i Topert | <u>y</u> | 12/13 |
| Be as complete and accurate as possible | | | | | |
| is needed, copy the Additional Page, fill i number (if known). | t out, number the entries, and attach it to | this form. On the | top of any additio | nal pages, write your na | me and case |
| Do any creditors have claims secured | by your property? | | | | |
| | this form to the court with your other s | schodulos Vou b | ave nothing else | to roport on this form | |
| <u>_</u> | • | scriedules. Tou n | ave nouning else | to report on this form. | |
| Yes. Fill in all of the information | n below. | | | | |
| Part 1: List All Secured Claims | | | | | |
| | s more than one secured claim, list the credi | itor separately | Column A | Column B | Column C |
| | as a particular claim, list the other creditors in etical order according to the creditor's name. | | Amount of claim Oo not deduct the | Value of collateral that supports this | Unsecured portion |
| much as possible, list the claims in alphabe | silical order according to the creditor's flame. | | alue of collateral. | claim | If any |
| 2.1 Lincoln Automotive | | | ¢42.422.00 | ¢0.00 | ¢42.422.00 |
| Financial Service | Describe the property that secures th | ne claim: | \$12,433.00 | \$0.00 | \$12,433.00 |
| Creditor's Name | 2017 Lincoln MKZ | | | | |
| Attn. Pankruntov | LEASING | | | | |
| Attn: Bankruptcy Po Box 542000 | As of the date you file, the claim is: C | heck all that | | | |
| Omaha, NE 68154 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as m | ortgage or secured | | | |
| ☐ Debtor 2 only | car loan) | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | |
| Opened | | | | | |
| 03/17 Last | | | | | |
| Active | | | | | |
| Date debt was incurred 3/12/18 | Last 4 digits of account number | er 7279 | | | |
| | | | | | |
| 2.2 Wells Fargo Home Mor | Describe the property that secures th | ne claim: | \$81,896.00 | \$86,000.00 | \$0.00 |
| Creditor's Name | 3341 184th St Unit 1B Homew | vood, IL | | | |
| Attn: Bankruptcy | 60430 Cook County | | | | |
| Mac X7801-014 3476 Stateview Blvd | As of the date you file, the claim is: C | heck all that | | | |
| Fort Mill, SC 29715 | apply. | | | | |
| Number, Street, City, State & Zip Code | ☐ Contingent ☐ Unliquidated | | | | |
| Number, Street, City, State & Zip Code | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as m | ortgage or secured | | | |
| Debtor 2 only | car loan) | J. J 1111100 | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | .a.no o nonj | | | |
| | | | | | |

Official Form 106D

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 19 of 59

| Debtor 1 Star Mix | | | | Case number (if know) | |
|--|---|---|-------|-----------------------|---|
| First Name | Middle Na | ame Last Name | | - | |
| ☐ Check if this claim community debt | relates to a | Other (including a right to offset) | | | |
| Date debt was incurre | Opened 02/17 Last Active d 3/04/18 | Last 4 digits of account number | 4636 | | |
| | | olumn A on this page. Write that number | here: | \$94,329.0 | D |
| If this is the last pag Write that number he | | the dollar value totals from all pages. | | \$94,329.0 | 0 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | Document | Page 2 | 0 of 59 | |
|--|--|--|--|--|--|
| Fill in 1 | this information to identify yo | our case: | | | |
| Debtor | 1 Star Mix | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor | 2 | | | | |
| Spouse | if, filing) First Name | Middle Name | Last Name | | |
| United | States Bankruptcy Court for the | e: NORTHERN DISTRICT OF | ILLINOIS | | |
| | | | | | |
| Case n | umber | | | _ | 7. Check if this is an |
| II KIIOWII |) | | | L | Check if this is an amended filing |
| | | | | | amended ming |
| Offici | al Form 106E/F | | | | |
| | | Who Have Unsecure | ed Claims | | 12/15 |
| ny exec chedul chedul eft. Atta | cutory contracts or unexpired lea e G: Executory Contracts and Un e D: Creditors Who Have Claims | ses that could result in a claim. Als expired Leases (Official Form 106G Secured by Property. If more space | so list executory of i). Do not include is needed, copy | Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property ((any creditors with partially secured cl the Part you need, fill it out, number the not file that Part. On the top of any | Official Form 106A/B) and on aims that are listed in the entries in the boxes on the |
| Part 1: | List All of Your PRIORITY | Unsecured Claims | | | |
| 1. Do | any creditors have priority unsec | cured claims against you? | | | |
| | No. Go to Part 2. | | | | |
| | Yes. | | | | |
| | | | | | |
| | List All of Your NONPRIO | RITY Unsecured Claims | | | |
| Part 2: | List All of Your NONPRIO | | | | |
| Part 2: | any creditors have nonpriority u | nsecured claims against you? | vith your other sch | edules | |
| Part 2: | any creditors have nonpriority un | | vith your other sche | edules. | |
| Part 2: | any creditors have nonpriority u | nsecured claims against you? | vith your other sche | edules. | |
| Part 2: 3. Do 4. List uns | any creditors have nonpriority under the control of | nsecured claims against you? nis part. Submit this form to the court we declaims in the alphabetical order of the tately for each claim. For each claim lis | of the creditor who | o holds each claim. If a creditor has mor type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou | dy included in Part 1. If more |
| Part 2: 3. Do 4. List uns that | any creditors have nonpriority under the control of | nsecured claims against you? nis part. Submit this form to the court we declaims in the alphabetical order of the tately for each claim. For each claim lis | of the creditor who | o holds each claim. If a creditor has mor type of claim it is. Do not list claims alread | dy included in Part 1. If more |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority under the No. You have nothing to report in the Yes. It all of your nonpriority unsecure the creditor separence on one creditor holds a particular clait to 2. | nis part. Submit this form to the court was dealers in the alphabetical order of rately for each claim. For each claim list im, list the other creditors in Part 3.If you | of the creditor who sted, identify what to ou have more than | o holds each claim. If a creditor has mor type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority under the control of | nis part. Submit this form to the court was dealers in the alphabetical order of rately for each claim. For each claim list im, list the other creditors in Part 3.If you | of the creditor who | o holds each claim. If a creditor has mor type of claim it is. Do not list claims alread | dy included in Part 1. If more tt the Continuation Page of |
| Part 2: 3. Do I I List uns that Par | any creditors have nonpriority under No. You have nothing to report in the Yes. It all of your nonpriority unsecure and one creditor holds a particular claim to the Citibank Nonpriority Creditor's Name Centralized Bankruptcy | nis part. Submit this form to the court was dealers in the alphabetical order of rately for each claim. For each claim list im, list the other creditors in Part 3.If you | of the creditor who sted, identify what to ou have more than account number | b holds each claim. If a creditor has more type of claim it is. Do not list claims alread a three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority unlike No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separt one creditor holds a particular claim to the Centralized Bankruptcy Po Box 790034 | nis part. Submit this form to the court was dealers in the alphabetical order of rately for each claim. For each claim list im, list the other creditors in Part 3.If you | of the creditor who sted, identify what to ou have more than account number | b holds each claim. If a creditor has more type of claim it is. Do not list claims already three nonpriority unsecured claims fill out | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority un No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separate one creditor holds a particular clait to a comparisority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 | nis part. Submit this form to the court was declaims in the alphabetical order of the rately for each claim. For each claim listim, list the other creditors in Part 3.If you have a digits of a when was the declaims are considered. | of the creditor who sted, identify what to ou have more than account number lebt incurred? | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority unlike No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separt one creditor holds a particular claim to the Centralized Bankruptcy Po Box 790034 | nis part. Submit this form to the court was dealy for each claim. For each claim listim, list the other creditors in Part 3.If you have a digits of a when was the deal of the date you | of the creditor who sted, identify what to ou have more than account number lebt incurred? | b holds each claim. If a creditor has more type of claim it is. Do not list claims alread a three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority under the debt? Check of the debt? Check of the debt? | nis part. Submit this form to the court was declaims in the alphabetical order of ately for each claim. For each claim list im, list the other creditors in Part 3.If you have the declaim when was the declaim. As of the date you have the date you have the date you have the date one. | of the creditor who sted, identify what to ou have more than account number lebt incurred? | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | Any creditors have nonpriority units. No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separation one creditor holds a particular claim to the creditor holds a particular claim to | nis part. Submit this form to the court was declaims in the alphabetical order of a tely for each claim. For each claim listim, list the other creditors in Part 3.If you have been some. Last 4 digits of a when was the declaim and the continue of the court was a conti | of the creditor who sted, identify what to ou have more than account number lebt incurred? | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority un. No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separation one creditor holds a particular clait to 2. Citibank Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zip Cod Who incurred the debt? Check of Debtor 1 only Debtor 2 only | nis part. Submit this form to the court was declaims in the alphabetical order of rately for each claim. For each claim listim, list the other creditors in Part 3.If you have the other creditors in Part 3.If you have the declaim as | of the creditor who sted, identify what to ou have more than account number lebt incurred? | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority un. No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separation one creditor holds a particular claim to the creditor holds a particular claim to the centralized Bankruptcy. Citibank Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zip Cod Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 2 only | nis part. Submit this form to the court was declaims in the alphabetical order of ately for each claim. For each claim list im, list the other creditors in Part 3.If you have the declaim. Last 4 digits of a When was the declaim. As of the date you have the declaim. Contingent Unliquidated Disputed | of the creditor who sted, identify what to ou have more than account number lebt incurred? ou file, the claim | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 is: Check all that apply | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | Any creditors have nonpriority under the control of | nis part. Submit this form to the court was declaims in the alphabetical order of ately for each claim. For each claim list im, list the other creditors in Part 3.If you have the declaim and the cone. Last 4 digits of a when was the declaim and the cone. Contingent Unliquidated Disputed Type of NONPRI | of the creditor who sted, identify what to ou have more than account number lebt incurred? ou file, the claim in | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 is: Check all that apply | dy included in Part 1. If more at the Continuation Page of |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority un. No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separation one creditor holds a particular claim to the creditor holds a particular claim to the centralized Bankruptcy. Citibank Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zip Cod Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 2 only | insecured claims against you? Inis part. Submit this form to the court was declaims in the alphabetical order of ately for each claim. For each claim list im, list the other creditors in Part 3.If you have the other creditors in Part 3.If you have the declaration of the date of | of the creditor who sted, identify what to ou have more than account number lebt incurred? ou file, the claim in | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 is: Check all that apply | ty included in Part 1. If more at the Continuation Page of Total claim \$349.00 |
| Part 2: 3. Do 4. List uns that | Any creditors have nonpriority units. No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separation one creditor holds a particular claim to the centralized Bankruptcy. Citibank Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zlp Cod Who incurred the debt? Check of the Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and Check if this claim is for a company to the control of the control of the debtors and Check if this claim is for a company to the control of the control of the control of the debtors and Check if this claim is for a control of the contro | insecured claims against you? Inis part. Submit this form to the court was declaims in the alphabetical order of ately for each claim. For each claim list im, list the other creditors in Part 3.If you have the other creditors in Part 3.If you have the declaration of the date of | of the creditor who sted, identify what to ou have more than account number lebt incurred? ou file, the claim in IORITY unsecureds rising out of a separity steps. | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 is: Check all that apply | ty included in Part 1. If more at the Continuation Page of Total claim \$349.00 |
| Part 2: 3. Do 4. List uns that Par | any creditors have nonpriority un. No. You have nothing to report in the Yes. It all of your nonpriority unsecure ecured claim, list the creditor separation one creditor holds a particular claim to 2. Citibank Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zip Cod Who incurred the debt? Check of the Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and clebt Check if this claim is for a clebt | nis part. Submit this form to the court was part. Submit part and pa | of the creditor who sted, identify what to ou have more than account number lebt incurred? ou file, the claim in IORITY unsecureds rising out of a sepaclaims | p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 9489 Opened 02/14 Last Active 2/27/18 is: Check all that apply | ty included in Part 1. If more at the Continuation Page of Total claim \$349.00 |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 21 of 59

Debtor 1 Star Mix Case number (if know) \$1.00 4.2 Citibank Last 4 digits of account number Nonpriority Creditor's Name Attn: Centralized Bankruptcy When was the debt incurred? PO Box 20507 Kansas City, MO 64195 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Overdrawn 3 ☐ Yes 4.3 Citibankna Last 4 digits of account number 2351 \$16,786.00 Nonpriority Creditor's Name Citibank Corp/Centralized Opened 02/17 Last Active **Bankruptcy** When was the debt incurred? 2/27/18 Po Box 790034 St Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.4 Citibankna Last 4 digits of account number 5067 \$8,198.00 Nonpriority Creditor's Name Citibank Corp/Centralized Opened 05/12 Last Active 2/02/18 **Bankruptcy** When was the debt incurred? Po Box 790034 St Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Check Credit Or Line Of Credit ☐ Yes

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 22 of 59

Debtor 1 Star Mix Case number (if know) \$16,629.00 4.5 Citicards Cbna Last 4 digits of account number 7494 Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Opened 05/12 Last Active Bankrupt When was the debt incurred? 12/27/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 ComEd Last 4 digits of account number \$1,100.00 Nonpriority Creditor's Name When was the debt incurred? Attn Bankruptcy PO Box 805379 Chicago, IL 60680 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 Comenity Bank/Harlem Furniture Last 4 digits of account number 1828 \$5,099.00 Nonpriority Creditor's Name Opened 04/17 Last Active Attn: Bankruptcy Dept Po Box 182125 When was the debt incurred? 12/16/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 23 of 59

Debtor 1 Star Mix Case number (if know) \$564.00 4.8 Comenity Bank/Pier 1 Last 4 digits of account number 4932 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 06/17 Last Active Po Box 182125 When was the debt incurred? 1/28/18 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.9 **Comenity Bank/Victoria Secret** Last 4 digits of account number 0091 \$868.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 06/13 Last Active Po Box 182125 When was the debt incurred? 1/28/18 Columbus, OH 45318 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.1 \$3,268,00 Costco Go Anywhere Citicard 5769 Last 4 digits of account number 0 Nonpriority Creditor's Name Centralized Bk/Citicorp Credit Card Opened 04/17 Last Active Srvs When was the debt incurred? 12/16/17 Po Box 790040 St Louis, MO 63179 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card T Yes

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 24 of 59

Debtor 1 Star Mix Case number (if know) 4.1 FedLoan Servicing 0002 \$86,419.00 Last 4 digits of account number Nonpriority Creditor's Name **Attention: Bankruptcy** Opened 06/12 Last Active Po Box 69184 When was the debt incurred? 2/28/18 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.1 2 4226 Unknown Glelsi/goal Financial Last 4 digits of account number Nonpriority Creditor's Name Opened 09/05 Last Active 2401 International Lane When was the debt incurred? 7/02/09 Madison, WI 53704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.1 **Heather Hill** \$700.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Hot Lunch Program When was the debt incurred? 1439 Lawrence Crescent Flossmoor, IL 60422 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify School Lunches ☐ Yes

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 25 of 59 Case number (if know) Debtor 1 Star Mix 4.1 Illinois Department of Revenue Unknown Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Section** When was the debt incurred? PO Box 64338 Chicago, IL 60664-0338 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.1 **Illinois Dept of Employment Securit Notic Only** Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name **Bankruptcy Unit Collection** When was the debt incurred? **Subdivis** 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.1 **Illinois Tollway Authority** \$23,000.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Legal Dept When was the debt incurred? 2700 Ogden Ave. Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Non Dischargeable ☐ Yes

Document Page 26 of 59 Case number (if know) Debtor 1 Star Mix 4.1 **Internal Revenue Service** Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.1 **ISAC** \$2,348.00 Last 4 digits of account number 8 Nonpriority Creditor's Name **PO Box 235** When was the debt incurred? Deerfield, IL 60015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 South Suburban Hospital \$600.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 17800 Kedzie Avenue When was the debt incurred? Hazel Crest, IL 60429 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Document Page 27 of 59 Debtor 1 Star Mix Case number (if know) 4.2 Synchrony Bank/Amazon 6628 \$429.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 06/17 Last Active Po Box 965060 When was the debt incurred? 11/19/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/Lowes 5270 \$1,107.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 05/17 Last Active When was the debt incurred? Po Box 965060 1/26/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/TJX 7281 \$2,015.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 04/17 Last Active Attn: Bankruptcy Dept Po Box 965060 When was the debt incurred? 12/17/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

| or 1 Star Mix | Document Page 28 | Case nu | Imber (if know) | |
|---|---|-----------------|---|-------------------------|
| Synchrony Bank/Walmart | Last 4 digits of account number | 8210 | | \$6,110.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opene 1/12/1 | ed 05/12 Last Active 8 | _ |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check a | all that apply | |
| Debtor 1 only | ☐ Contingent | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agre | eement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | aor. ag.c | | |
| No | ☐ Debts to pension or profit-sharin | g plans, ar | nd other similar debts | |
| Yes | Other. Specify Credit Card | I | | _ |
| Visa Dept Store National Bank/Macy's | Last 4 digits of account number | 5309 | | \$1,712.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053 Mason, OH 45040 | When was the debt incurred? | Opene 12/02/ | ed 01/09 Last Active 17 | _ |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check a | all that apply | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt | Obligations arising out of a sepa | ration agre | eement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | | |
| No | Debts to pension or profit-sharing | g plans, ar | nd other similar debts | |
| Yes | Other. Specify Charge Acc | count | | _ |
| List Others to Be Notified About a Deb this page only if you have others to be notified al ying to collect from you for a debt you owe to sor | oout your bankruptcy, for a debt that y | | | |
| emore than one creditor for any of the debts that ied for any debts in Parts 1 or 2, do not fill out or | submit this page. | | · | dditional persons to be |
| | On which entry in Part 1 or Part 2 did you .ine 4.6 of (<i>Check one</i>): | | ginal creditor? reditors with Priority Unsecured Cla | nime |
| Swift Dr | | | reditors with Nonpriority Unsecured | |
| Brook Terrace, IL 60523 | ast 4 digits of account number | Paπ 2: Ci | realtors with Nonphority Unsecured | d Claims |
| : Add the Amounts for Each Type of Un | secured Claim | | | |
| I the amounts of certain types of unsecured clair of unsecured claim. | ns. This information is for statistical re | eporting p | ourposes only. 28 U.S.C. §159. Ad | dd the amounts for each |
| | | | Total Claim | |
| 6a. Domestic support obligations Total | | 6a. | \$ |) |

| | | | | i otai oiaiiii |
|-----|--|---|---|---|
| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| | | | - | |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6b. 6c. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated | 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were intoxicated 6c. | 6b. Taxes and certain other debts you owe the government 6b. \$ 6c. Claims for death or personal injury while you were intoxicated 6c. \$ |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Page 29 of 59 Case number (if know) Document

Debtor 1 Star Mix

| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
|-----------------------|------------|---|------------|----------|--------------------------|
| Total | 6f. | Student loans | 6f. | \$ | Total Claim 86,419.00 |
| claims from Part 2 | 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 90,883.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 177,302.00 |

| | | | II FAUE 30 OL 33 | |
|---------------------|--------------------------|-------------------|------------------|-----------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Star Mix | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | <u></u> |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | O.I.y | | Otato | 2 0000 | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | Jity | | Cidio | | |

| | | Docume | ent Page 31 d | of 59 | |
|--------------------------------|--|---|---|---|--|
| Fill in thi | is information to identify you | r case: | | | |
| Dahtar 4 | Ot Mi | | | | |
| Debtor 1 | Star Mix First Name | Middle Name | Last Name | | |
| Dobtor 2 | | Wildule Name | Last Name | | |
| Debtor 2 (Spouse if, f | | Middle Name | Last Name | | |
| (-1 , | 3, | | | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| • | | | | | |
| Case nur (if known) | mber | | | | ☐ Check if this is an |
| (ii idiowii) | | | | | Check if this is an amended filing |
| | | | | | amended ming |
| Officia | al Form 106H | | | | |
| | | | | | |
| Sche | dule H: Your Cod | debtors | | | 12/15 |
| | | | | | |
| our nam | ne and case number (if known o you have any codebtors? (i | n). Answer every question | | | o of any Additional Pages, write |
| _ | | | • | | |
| ■ No | - | | | | |
| Arizo No Ye 3. In Co in lir | ne 2 again as a codebtor only | a, Nevada, New Mexico, Pu buse, or legal equivalent live otors. Do not include your if that person is a guaran | e with you at the time? spouse as a codebtol tor or cosigner. Make | r if your spouse is filing sure you have listed th | |
| out (| Column 2. | | | • | |
| | Column 1: Your codebtor Name, Number, Street, City, State and | ZIP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, line | • |
| 3.1 | Name | | | _ <u>_</u> | |
| | | | | ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | e |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| | | | | — | |
| 3.2 | Neme | | | DSchedule D, line | |
| | Name | | | Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | e |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 32 of 59

| Fill | in this information to identify you | r case: | | | | | | | | |
|-------------|---|--|---|-----------|------|-------------|---------------------------|--------------------------|----------------------------------|----------|
| Del | btor 1 Star Mix | | | | | | | | | |
| | btor 2 puse, if filing) | | | | | | | | | |
| Uni | ited States Bankruptcy Court for | the: NORTHERN DISTRI | CT OF ILLINOIS | | | | | | | |
| (If kr | se number | | - | | | □ Ai | | ed filing ent showin | g postpetition ollowing date: | |
| | fficial Form 106l | | | | | M | IM / DD/ Y | YYY | | |
| | chedule I: Your In | | | | | | | | | 12/1 |
| spo atta | plying correct information. If youse. If you are separated and you a separate to this for the separate Sheet to this for Describe Employment. | our spouse is not filing wm. On the top of any addit | ith you, do not inclu | de infor | mati | on about | your spo umber (if | ouse. If mo known). A | ore space is answer every | needed, |
| | information. | | | | | | | | ling spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed□ Not employed | | | | ☐ Employed ☐ Not employed | | | |
| | employers. | Occupation | Domestic Viole | nce Ma | nag | er | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Cook County | | | | | | | |
| | Occupation may include stude or homemaker, if it applies. | nt Employer's address | | | | | | | | |
| | | How long employed t | there? | | | | _ | | | |
| Pai | rt 2: Give Details About | Monthly Income | | | | | | | | |
| | imate monthly income as of the use unless you are separated. | e date you file this form. If | you have nothing to re | eport for | any | line, write | \$0 in the | space. Inc | clude your noi | n-filing |
| | ou or your non-filing spouse have e space, attach a separate shee | | ombine the informatio | n for all | empl | oyers for | that perso | on on the li | nes below. If | you need |
| | | | | | | For Deb | otor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, s deductions). If not paid month | | | 2. | \$ | 4, | ,985.50 | \$ | N/A | |
| 3. | Estimate and list monthly ov | ertime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add | d line 2 + line 3. | | 4. | \$ | 4.98 | 35.50 | \$ | N/A | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 33 of 59

| Deb | tor 1 | Star Mix | - | (| Case | number (<i>if ki</i> | nown) | | | | |
|-----|-----------------------------|--|---------|------------|------|-----------------------|-------|------|--------------------|----------------|------------------|
| | | | | | For | Debtor 1 | | | Debtor filing s | 2 or spouse | |
| | Cop | by line 4 here | 4. | | \$ | 4,98 | 5.50 | \$ | | N/A | _ |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | а. | \$ | 32 | 5.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | | 2.50 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 50 | Э. | \$ | | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 50 | d. | \$ | | 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5€ | €. | \$ | 150 | 6.00 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f | | \$_ | | 0.00 | \$ | | N/A | _ |
| | 5g. | Union dues | 50 | - | \$_ | | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | _ 5r | า.+ | \$_ | | 0.00 | + \$ | | N/A | _ |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | | 3.50 | \$ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 4,082 | 2.00 | \$ | | N/A | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 88 | а. | \$ | (| 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | ٥. | \$ | | 0.00 | \$ | | N/A | = |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | 3 . | \$ | | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 80 | | \$ | | 0.00 | \$ | | N/A | _ |
| | 8e. | Social Security | 86 | Э. | \$ | | 0.00 | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f | :. | \$ | | 0.00 | \$ | | N/A | _ |
| | 8g. | Pension or retirement income | 80 | | \$ | | 0.00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | _ 8h | า.+ | \$_ | (| 0.00 | + \$ | | N/A | _ |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | § | | 0.00 | \$ | | N/A | 4 |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 4,082.00 | + \$ | | N/A | = \$ | 4,082.00 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _ | | +,002.00 | | | 17/7 | _ | 4,002.00 |
| 11. | Star Incli othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify: | depe | | | • | | • | chedule 11. | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certaillies | | | | | | | 12. | \$ | 4,082.00 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | ι | Combine month! | ned ly income |
| | | No. | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 34 of 59

| | | | | | | 1 | | |
|------------|-------------------------------|-------------------------------------|-------------------------|---|--|------------------|--|-------------------------------|
| Fill | in this informa | tion to identify yo | ur case: | | | | | |
| Deb | tor 1 | Star Mix | | | | Check | k if this is: | |
| | | | | | | _ | An amended filing | |
| | tor 2 | | | | | _ | A supplement show 13 expenses as of | ving postpetition chapter |
| (Spc | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankr | ruptcy Court for the: | NORTH | IERN DISTRICT OF ILLIN | OIS | 1 | MM / DD / YYYY | |
| 1 | e number | | | | | | | |
| (If kı | nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| So | chedule | J: Your I | Exper | ses | | | | 12/1 |
| Be info | as complete a | and accurate as | possible. eded, atta | If two married people ar ch another sheet to this | | | | |
| Par | | ibe Your House | hold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | ■ No. Go to □ Yes. Doe | line 2. s Debtor 2 live i | n a separa | ate household? | | | | |
| | □N | 0 | • | | | | | |
| | □ Y | es. Debtor 2 mus | t file Offici | al Form 106J-2, Expenses | for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Child | | 11 | ■ Yes |
| | | | | | | _ | | □ No |
| | | | | | Child | | 11 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | Child | | 22 | Yes |
| | | | | | Child | | 24 | □ No ■ Yes |
| 3. | Do your exp | enses include | | No | | | | _ 100 |
| | • | f people other ti d your depende | ^{han} ⊓ | Yes | | | | |
| exp | imate your ex | | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | value of such | n assistance and | | government assistance i luded it on <i>Schedule I:</i>) | | | Your expe | ansas |
| (Off | ficial Form 10 | 161.) | | | | | Tour expe | |
| 4. | | or home owners | | ses for your residence. I | nclude first mortgag | e 4. \$ | | 800.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4a. \$ 4b. \$ | | 0.00 |
| | • | • | | ipkeep expenses | | 4c. \$ | | 0.00 |
| | 4d. Home | owner's associat | ion or con | dominium dues | | 4d. \$ | | 251.00 |
| 5. | Additional r | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. \$ | | 0.00 |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 35 of 59

| Debtor 1 | Star Mix | Case num | ber (if known) | |
|----------------|---|----------------|-------------------|----------------------------|
| 6. Util | ities: | | | |
| 6. 6 1. | Electricity, heat, natural gas | 6a. | \$ | 362.00 |
| 6b. | Water, sewer, garbage collection | 6b. | · - | 100.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 300.00 |
| 6d. | Other. Specify: | 6d. | * | 0.00 |
| | d and housekeeping supplies | 7. | | |
| | | | · | 400.00 |
| _ | Idcare and children's education costs | 8. 9. | \$ | 827.00 |
| | thing, laundry, and dry cleaning | | \$ | 75.00 |
| | sonal care products and services | 10. | · | 75.00 |
| | dical and dental expenses | 11. | \$ | 50.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | 12. | ¢ | 200.00 |
| | not include car payments. | | · . | |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | ritable contributions and religious donations | 14. | \$ | 0.00 |
| | Jrance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | 4 F :- | Φ. | 0.00 |
| | Life insurance | 15a. | · - | 0.00 |
| | . Health insurance | 15b. | · | 0.00 |
| | . Vehicle insurance | 15c. | * | 160.00 |
| | . Other insurance. Specify: | 15d. | \$ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | _ | |
| | cify: | 16. | \$ | 0.00 |
| | allment or lease payments: | | _ | |
| | . Car payments for Vehicle 1 | 17a. | · | 478.00 |
| | . Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c | Other. Specify: | 17c. | \$ | 0.00 |
| 17d | Other. Specify: | 17d. | \$ | 0.00 |
| | ir payments of alimony, maintenance, and support that you did not report a | | | 0.00 |
| | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I) |) . 18. | \$ | |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| | cify: | 19. | | |
| | er real property expenses not included in lines 4 or 5 of this form or on Sci | | | |
| | . Mortgages on other property | 20a. | · | 0.00 |
| 20b | . Real estate taxes | 20b. | \$ | 0.00 |
| 20c | . Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d | . Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | . Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . Oth | er: Specify: | 21. | +\$ | 0.00 |
| | | | - Ψ | 0.00 |
| | culate your monthly expenses | | | |
| | . Add lines 4 through 21. | | \$ | 4,078.00 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 |) : | \$ | |
| 22c | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,078.00 |
| | | | <u> </u> | .,010.00 |
| | culate your monthly net income. | | | |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,082.00 |
| 23b | . Copy your monthly expenses from line 22c above. | 23b. | -\$ | 4,078.00 |
| | | | | · · |
| 23c | . Subtract your monthly expenses from your monthly income. | | | 4.00 |
| | The result is your monthly net income. | 23c. | \$ | 4.00 |
| | | | | |
| | you expect an increase or decrease in your expenses within the year after | | | |
| | example, do you expect to finish paying for your car loan within the year or do you expect yo ification to the terms of your mortgage? | our mortgage | payment to increa | ase or decrease because of |
| | , , , | | | |
| 1 | | | | |
| | /es. Explain here: | | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 36 of 59

| Debtor 1 | | | | | |
|---|--|-------------------------|------------------------------|---|---|
| 700101 1 | Star Mix | | | | |
| ebtor 2 | First Name | Middle Name | Last Name | | |
| pouse if, filing) | First Name | Middle Name | Last Name | | |
| nited States B | sankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| ase number | | | | | |
| known) | | | | | ☐ Check if this is an amended filing |
| | | | | | |
| | m 106Dec | | _ | | |
| eclara [.] | tion About a | an Individua | l Debtor's Sc | hedules | 12/1 |
| | 16 U.S.C. 99 152, 1341, 1 | l519, and 3571. | ikruptcy case can result i | 11 mics up to \$250,0 | tement, concealing property, or 000, or imprisonment for up to 20 |
| Sig | gn Below | l519, and 3571. | ikruptcy case can result i | mines up to \$200, | |
| | gn Below | | rney to help you fill out b | | 000, or imprisonment for up to 20 |
| | gn Below | | | | |
| Did you pa | gn Below | | | pankruptcy forms? Attach <i>Ba</i> | 000, or imprisonment for up to 20 |
| Did you pa | gn Below ay or agree to pay some Name of person | eone who is NOT an atto | | pankruptcy forms? Attach Ba Declaration | 000, or imprisonment for up to 20 nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119 |
| Did you pa | gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct. | eone who is NOT an atto | orney to help you fill out b | pankruptcy forms? Attach Ba Declaration | 000, or imprisonment for up to 20 nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119 |
| Did you part No Yes. Under penathat they an X /s/ Sta | gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct. | eone who is NOT an atto | rney to help you fill out b | eankruptcy forms? Attach Ba Declaration d with this declarate | 000, or imprisonment for up to 20 nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119 |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 37 of 59

| Debtor 1 Debtor 1 Star Mix This Name Mode have Let Name Let Name United States Barkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (frecent) Case number (frecent) Case number (frecent) Case and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if nown), hanswer every question. Part 1 Give Datalis About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No No Tys. List all of the places you lived in the last 3 years, Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Prior Tio Case Same as Debtor 2 Illed there 648 Sequoia Ln From Tio Same as Debtor 1 No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property statement of territory? (Community property statement | | | | | | |
|--|-----------------|---------------------------------------|---------------------------------|--------------------------------|------------------------------|---------------------|
| Debtor 2 Pick Name Midde Name Last Name Debtor 2 Pick Name Debtor 2 | Fill in this in | nformation to identify you | r case: | | | |
| Debtor 2 Squeen Brief Free Name Mode Name Last Name Mode Name | Debtor 1 | | | | | |
| Statement of Financial Affairs for Individuals Filling for Bankruptcy Check if this is an amended filling | Debtor 2 | First Name | Middle Name | Last Name | | |
| Case number Check if this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy Afril Bos as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married Not married Not married Pebtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Rom-To: Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 From-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Prom-To: | |) First Name | Middle Name | Last Name | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Sattle Give Details About Your Marital Status and Where You Lived Before | United State | es Bankruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Sattle Give Details About Your Marital Status and Where You Lived Before | Casa numbe | or. | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Fort1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Peter 1 Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Ived there Same as Debtor 1 Ived there Same as Debtor 1 Ived there Same as Debtor 1 Sa | | zı | | | | Check if this is an |
| Be as complete and accurate as possible. If wo married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | | | | | amended filing |
| Be as complete and accurate as possible. If wo married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | _ | | | | |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12 | | | | | | |
| Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Sive Details About Your Marital Status and Where You Lived Before What is your current marital status? Married | Stateme | ent of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/10 |
| Married Not | | | | | | |
| What is your current marital status? | | | | unis form. On the top of an | y additional pages, write yo | ur name and case |
| What is your current marital status? | Part 1: G | ive Details About Your Ma | arital Status and Where You | Lived Before | | |
| Married | | vour current marital statu | 167 | | | |
| ■ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? □ No ■ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: □ Dates Debtor 1 □ Ilived there □ Same as Debtor 1 □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). □ No □ Yes. Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ Debtor 1 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Debtor 2 □ | _ | | | | | |
| 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: | | | | | | |
| □ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: □ Dates Debtor 1 □ Ived there 648 Sequoia Ln Flossmoor, IL 60422 □ Prior To: □ Same as Debtor 1 □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). □ No □ Yes. Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ Debtor 1 □ Sources of income Check all that apply. □ Debtor 2 □ Sources of income Check all that apply. □ Debtor 2 □ Sources of income Check all that apply. □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips | - NO | n marned | | | | |
| Tyes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there | 2. During | the last 3 years, have you | lived anywhere other than v | where you live now? | | |
| Debtor 1 Prior Address: Dates Debtor 1 Ilved there Debtor 2 Prior Address: Dates Debtor 2 Ilved there | ☐ No | 1 | | | | |
| lived there G48 Sequoia Ln | ■ Ye | s. List all of the places you | ived in the last 3 years. Do no | ot include where you live now | <i>I</i> . | |
| ### Flossmoor, IL 60422 2/17/18 From-To: #### Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No | Debtor | 1 Prior Address: | | Debtor 2 Prior Ac | Idress: | |
| states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Date of the washington and Wisconsin.) Did you have sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Sources of income (before deductions and exclusions) Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Debtor 2 Sources of income Check all that apply. Under the two previous calendar years? Fill in the details. Debtor 1 Sources of income Check all that apply. Under the two previous calendar years? Fill in the details. Debtor 2 Sources of income Check all that apply. Under the two previous calendar years? Fill in the two previous calendar years? | | | | ☐ Same as Debtor | 1 | |
| Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Sources of income Check all that apply. Perom January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Sources of Your Income Operating a business during this year or the two previous calendar years? From Jean Jean Jean Jean Jean Jean Jean Jean | states and te | <i>rritori</i> es include Arizona, Ca | lifornia, Idaho, Louisiana, Nev | vada, New Mexico, Puerto R | | |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, tips Wages, commissions, bonuses, tips | ⊔ Ye | s. Make sure you fill out Sci | hedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips The date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$12,528.00 Wages, commissions, bonuses, tips | Part 2 E | xplain the Sources of You | r Income | | | |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$12,528.00 Wages, commissions, bonuses, tips \$12,528.00 | Fill in th | e total amount of income yo | u received from all jobs and a | all businesses, including part | -time activities. | endar years? |
| Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Wages, commissions, bonuses, tips \$12,528.00 Wages, commissions, bonuses, tips | □ No | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Gross income (before deductions and exclusions) \$12,528.00 | ■ Ye | s. Fill in the details. | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Gross income (before deductions and exclusions) \$12,528.00 | | | Debtor 1 | | Debtor 2 | |
| From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | Gross income | | Gross income |
| the date you filed for bankruptcy: bonuses, tips bonuses, tips | | | Check all that apply. | | Check all that apply. | ` |
| ☐ Operating a business ☐ Operating a business | | | | \$12,528.00 | _ | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main

Document Page 38 of 59 Case number (if known) Star Mix Debtor 1 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$59,470.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$58,000.00 □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. П Debtor 1 Debtor 2 **Gross income from** Sources of income Sources of income **Gross income** Describe below. Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|---|------------------|-------------------|----------------------|---|
| Citibank Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO 64195 | | \$1,887.00 | \$0.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document

Page 39 of 59
Case number (if known) Debtor 1 Star Mix

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | ayment for | | | |
|-----|--|--|---|--|-----------------------------------|--------------------------------|--|--|--|
| | Lincoln Automotive Financial | | \$1,413.00 | \$12,433.00 | ☐ Mortgag | е | | | |
| | Service | | | | ■ Car | | | | |
| | Attn: Bankruptcy | | | | ☐ Credit C | ard | | | |
| | Po Box 542000 | | | | ☐ Loan Re | | | | |
| | Omaha, NE 68154 | | | | | s or vendors | | | |
| | | | | | Other | | | | |
| | Wells Fargo Home Mor | | \$2,400.00 | \$81,896.00 | ■ Mortgag | e | | | |
| | Attn: Bankruptcy Mac X7801-014 3476 Stateview | | | | ☐ Car | | | | |
| | Blvd | | | | ☐ Credit C | | | | |
| | Fort Mill, SC 29715 | | | | ☐ Loan Re | payment | | | |
| | | | | | | s or vendors | | | |
| | | | | | Other | - | | | |
| | a business you operate as a sole proprietor. 1 alimony. No | 11 U.S.C. § 101. Include pa | yments for domestic | support obligati | ons, sucn as cn | lid support and | | | |
| | Yes. List all payments to an insider. | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | this payment | | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider | | mens of transier a | my property on | account of a c | iost that selected an | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | r this payment ditor's name | | | |
| | Manufity I and Actions Democracia | | • | | | | | | |
| Fal | t 4: Identify Legal Actions, Repossession | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | cy, were you a party in and cases, small claims action | ny lawsuit, court ac is, divorces, collectio | tion, or adminis n suits, paternity | strative procee actions, suppo | ding? rt or custody | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Case title | Nature of the case | Court or agency | | Status of t | he case | | | |
| | Case number | Nature of the case | Court of agency | | Status of t | ne case | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo | | erty repossessed, f | oreclosed, garr | nished, attache | d, seized, or levied? | | | |
| | ■ No. Go to line 11. Yes. Fill in the information below. | | | | | | | | |
| | | Describe the Brancets | Describe the Drements | | | Value of the | | | |
| | Creditor Name and Address | Describe the Property | | Dat | le | Value of the property | | | |
| | | Explain what happene | d | | | 1 1 1 1 1 1 | | | |
| | | | | | | | | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 40 of 59 Case number (if known) Debtor 1 Star Mix 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made

Official Form 107

Person Who Made the Payment, if Not You

Gleason & Gleason LLC

Chicago, IL 60602 http://chilawyers.com

77 W. Washington, Ste 1218

\$1,200.00

2018

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 41 of 59

Debtor 1 Star Mix Document Page 41 of 59 Case number (if known)

| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | transferred | value of any prop | erty | Date payment or transfer was made | Amount of payment | | | |
|-----|---|---------------------------------|---|------|---|---|--|--|--|
| | Summit Financial Education Inc 4800 E Flower St Tucson, AZ 85712 | Credit Counse | ling | | 2018 | \$14.95 | | | |
| 17. | Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo | ors or to make payment | | | or transfer any prope | erty to anyone who | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address | Description and transferred | value of any prop | erty | Date payment or transfer was made | Amount of payment | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred payments paid in experience page 2. | | | Date transfer was made | | | |
| 19. | Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details. Name of trust | otection devices.) | ny property to a so | | | of which you are a Date Transfer was | | | |
| | | | | | | made | | | |
| | List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | • | | te account was used, sold, oved, or nsferred | Last balance before closing or transfer | | | |
| | Citibank Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO 64195 | XXXX- | ☐ Checking ☐ Savings ☐ Money Marke ☐ Brokerage ☐ Other | | on Use | \$0.00 | | | |

Debtor 1 Star Mix

| 21. | Do you now have, or did you have within 1 yea cash, or other valuables? | r before you filed for bankruptcy, ar | ny safe deposit box or other deposito | ry for securities, | | | |
|-----|---|---|---------------------------------------|-----------------------|--|--|--|
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | |
| | Citibank | | Air | □ No ■ Yes | | | |
| 22. | Have you stored property in a storage unit or p | lace other than your home within 1 | year before you filed for bankruptcy? | ? | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | · · · · | | | | | |
| Par | 9: Identify Property You Hold or Control for | Someone Else | | | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any propert | y you borrowed from, are storing for | , or hold in trust | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | |
| Par | 10: Give Details About Environmental Inform | ation | | | | | |
| For | he purpose of Part 10, the following definitions | apply: | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | air, land, soil, surface water, ground | - · | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | <u> </u> | aw, whether you now own, operate, o | or utilize it or used | | | |
| | Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or | | waste, hazardous substance, toxic s | ubstance, | | | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of when | they occurred. | | | | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liable | under or in violation of an environme | ental law? | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |

Case number (if known) Debtor 1 Star Mix 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Star Mix Star Mix Signature of Debtor 2 Signature of Debtor 1 Date April 5, 2018 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person ___ __. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 18-10093

Doc 1

Filed 04/06/18

Document

Entered 04/06/18 11:20:09

Page 43 of 59

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 44 of 59

| | | | • | |
|------------------------------------|-------------------------------|---------------------|--|---|
| Fill in this inforn | nation to identify your | case: | | |
| Debtor 1 | Star Mix | | | |
| Dahlar | First Name | Middle Name | Last Name | _ |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Bar | nkruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | _ |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | rm 100 | | | |
| | | n for Indiv | viduals Filing Under Ch | apter 7 12/15 |
| | | | <u> </u> | • |
| | vidual filing under cha | - | l out this form if: | |
| _ | e claims secured by yo | | | |
| You must file this | ver is earlier, unless th | ithin 30 days after | ot expired. you file your bankruptcy petition or by the e time for cause. You must also send copie | |
| If two married pe | ople are filing together | in a joint case, bo | oth are equally responsible for supplying co | rect information. Both debtors must |
| sign an | d date the form. | | | |
| | | | s needed, attach a separate sheet to this for | m. On the top of any additional pages, |
| | our name and case nun | iber (ii known). | | |
| Part 1: List Yo | our Creditors Who Have | Secured Claims | | |
| | | art 1 of Schedule D | : Creditors Who Have Claims Secured by P | operty (Official Form 106D), fill in the |
| information be Identify the cre | editor and the property the | nat is collateral | What do you intend to do with the proper secures a debt? | ty that Did you claim the property as exempt on Schedule C? |
| 0 111 1 | | | _ | _ |
| _ | incoln Automotive F ervice | inancial | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| | | | , , , | ■ Yes |
| Description of | 2017 Lincoln MKZ | | Retain the property and enter into a Reaffirmation Agreement. | |
| property securing debt: | LEASING | | ■ Retain the property and [explain]: ASSUME LEASE | |
| Creditor's W | /ells Fargo Home Mo | or | ☐ Surrender the property. | □No |
| name: | | | Retain the property and redeem it. | ■ Yes |
| Description of | 3341 184th St Unit | | Retain the property and enter into a Reaffirmation Agreement. | - 163 |
| property | Homewood, IL 604 | SU COOK | ☐ Retain the property and [explain]: | |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

County

Will the lease be assumed?

Official Form 108

securing debt:

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 45 of 59

| Deb | tor 1 | Star Mix | Case number (if known) | |
|--------------|---------------|--|--|-------|
| | | | | |
| | sor's na | | □ No | |
| | perty: | n of leased | ☐ Yes | |
| | sor's na | ame: n of leased | □ No | |
| | perty: | ii oi leaseu | ☐ Yes | |
| | sor's na | ame: n of leased | □ No | |
| | perty: | ii oi leaseu | ☐ Yes | |
| | sor's na | ame: n of leased | □ No | |
| | perty: | ii oi leaseu | ☐ Yes | |
| | sor's na | | □ No | |
| | perty: | n of leased | ☐ Yes | |
| | sor's na | | □ No | |
| | perty: | n of leased | ☐ Yes | |
| | sor's na | | □ No | |
| | perty: | n of leased | ☐ Yes | |
| Part | t 3: | Sign Below | | |
| Unde prop | er pena | alty of perjury, I declare that I have in nat is subject to an unexpired lease. | cated my intention about any property of my estate that secures a debt and any per | sonal |
| X | - | tar Mix | X | |
| | Star Signa | Mix ature of Debtor 1 | Signature of Debtor 2 | |
| | Date | April 5, 2018 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee
 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy CourtNorthern District of Illinois

| | | 1 tol them District of Immors | , | |
|-------|--|---|------------------------|------------------------|
| In re | Star Mix | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | | | | |
| | VE | ERIFICATION OF CREDITOR | MATRIX | |
| | | Number o | of Creditors: | 26 |
| | The above-named Debtor(s) (our) knowledge. |) hereby verifies that the list of cred | ditors is true and cor | rect to the best of my |
| | April 5, 2018 | /s/ Star Mix | | |

Citibank Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citibank
Attn: Centralized Bankruptcy
PO Box 20507
Kansas City, MO 64195

Citibankna Citibank Corp/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

ComEd
Attn Bankruptcy
PO Box 805379
Chicago, IL 60680

ComEd Attn: Bkcy Group 1919 Swift Dr Oak Brook Terrace, IL 60523

Comenity Bank/Harlem Furniture Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Pier 1 Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 45318 Costco Go Anywhere Citicard Centralized Bk/Citicorp Credit Card Srvs Po Box 790040 St Louis, MO 63179

FedLoan Servicing Attention: Bankruptcy Po Box 69184 Harrisburg, PA 17106

Glelsi/goal Financial 2401 International Lane Madison, WI 53704

Heather Hill Attn: Hot Lunch Program 1439 Lawrence Crescent Flossmoor, IL 60422

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Illinois Tollway Authority Attn: Legal Dept 2700 Ogden Ave. Downers Grove, IL 60515

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

ISAC PO Box 235 Deerfield, IL 60015

Lincoln Automotive Financial Service Attn: Bankruptcy Po Box 542000 Omaha, NE 68154

South Suburban Hospital 17800 Kedzie Avenue Hazel Crest, IL 60429

Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Wells Fargo Home Mor Attn: Bankruptcy Mac X7801-014 3476 Stateview Blvd Fort Mill, SC 29715 Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 54 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In 1 | e | Star Mix | | | | | | Case No. | | |
|------|----------|--|---------------------------------|--|-------------------------------------|--|---|---|--------------------|--------------------|
| | - | | | | | Ω | Debtor(s) | Chapter | 7 | |
| | | DIS | CL | OSURE | OF COMP | ENSATIO | N OF ATTO | RNEY FOR D | EBTOR(S) | |
| 1. | con | npensation paid to | me v | within one y | ear before the f | iling of the petit | tion in bankruptcy | rney for the above nar y, or agreed to be paid nkruptcy case is as for | to me, for service | |
| | | For legal service | es, I h | ave agreed | to accept | | | \$ | 865.00 | |
| | | Prior to the filin | g of t | his statemer | nt I have receive | ed | | \$ | 865.00 | |
| | | | | | | | | | 0.00 | |
| 2. | \$ | 335.00 of the | filing | g fee has bee | en paid. | | | | | |
| 3. | The | source of the cor | npens | sation paid t | o me was: | | | | | |
| | | ■ Debtor | | Other (spe | ecify): | | | | | |
| 4. | The | source of compe | nsatio | on to be paid | l to me is: | | | | | |
| | | Debtor | | Other (spe | ecify): | | | | | |
| 5. | | I have not agreed | l to sł | nare the abo | ve-disclosed co | mpensation with | n any other person | n unless they are men | bers and associate | es of my law firm. |
| | | | | | | | | who are not members e compensation is att | | my law firm. A |
| 6. | In 1 | return for the abov | ve-dis | sclosed fee, | I have agreed to | render legal se | rvice for all aspec | cts of the bankruptcy | case, including: | |
| | b. c. | Preparation and fi Representation of [Other provisions | iling of the cas ne as ne | of any petiti lebtor at the eeded] the debtor | on, schedules, s meeting of cree | statement of affa ditors and confir | nirs and plan whice rmation hearing, a | termining whether to th may be required; and any adjourned her ce to the debtor in | arings thereof; | |
| | | b. Prepara | tion | and filing | of any petition | on, schedules | , statements of | affairs and plan v | vhich may be re | equired; |
| | | c. Represe thereof; | entat | ion of the | debtor at the | meeting of c | reditors and co | onfirmation hearing | g, and any adjo | urned hearings |
| 7. | Ву | agreement with th a. Repres proceedin | enta | | | | | ng service: judicial lien avoida | ances, or any o | ther adversary |
| | | b. Debtor | is re | sponsible | for the 2 ma | ndatory credi | t counseling cl | asses. | | |
| | | c. This fee | e agr | eement de | oes not inclu | de representa | tion in motions | s to redeem. | | |

Case 18-10093 Doc 1 Filed 04/06/18 Entered 04/06/18 11:20:09 Desc Main Document Page 55 of 59

| In re | Star Mix | Case No. | |
|-------|-----------|----------|--|
| | Debtor(s) | | |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| CERTIFICATION | | | | | | |
|---|------------------------------------|--|--|--|--|--|
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | | | |
| April 5, 2018 | /s/ Julie M Gleason | | | | | |
| Date | Julie M Gleason 6273536 | | | | | |
| | Signature of Attorney | | | | | |
| | Gleason & Gleason | | | | | |
| | 77 W Washington, Ste 1218 | | | | | |
| | Chicago, IL 60602 | | | | | |
| | (312) 578-9530 Fax: (312) 578-9524 | | | | | |
| | troy@chicagobk.com | | | | | |
| | Name of law firm | | | | | |



Gleason & Gleason

Chapter 7 Information and Advice

Attorney fees \$940 + Court costs \$335 = \$1275 total costs

Payment Plan: 3-payments of \$425. If all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services rendered after the filing of your case.

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests.

FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case.

Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filling and my first 341 meeting of creditors. I understand that If my case closes without discharge and my certificate is dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen it.

Typical dischargeable debts: credit cards, medical bills, utilities, unsecured judgments, repossessions, personal loans, payday Loans

Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student loans, traffic tickets, parking tickets, fines, criminal restitution, debt for pelsonal injury or death related to a DUI, overpayment of government penefits, takes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the last 70 days may not be discharged.

Secured Loans Surrendering: (House|Car|Furniture|Jewelry) If you are surrendering a car or a house you are still responsible for tickets, code violations, HOA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans through municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union loans.

Secured Loans Keeping: Initial here: _____ I understand I must continue to make regular payments on all secured loans I am keeping. I may have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I understand I am required to maintain insurance. I understand that if I am keeping a property I must pay all mortgages including but home equity lines of credit.

Payday Loans Autodebits Post dated checks: You must stop them with your bank. It may require closing the bank account.

Utilities: If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used after your filing bate forward. If you bankrupt a phone or cellular service they may discontinue service.

.Credit reporting: We pull credit reports from Transunion and Experian. We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing bills.

Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debtor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

Refund Policy: If Client wants to terminate Gleason and Gleason, Client must notify Gleason and Gleason in writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund check (if applicable) within a reasonable time, for the purpose of determining the refund due, Gleason and Gleason's current hourly ate is \$300 an hour for attorney time.

| time, for the purpose of determining the refund due, G | leason and Gleason's current hourly rate is \$300 an hour for attorney time |
|--|---|
| client A Starting | Attorney 19 |
| Joint Client: | <u> </u> |

Hananwill Credit Counseling :: Contact Us

7/27/2016



Existing Customer Sign In



<u>Home</u>

Client Disclosures

Fee Schedule

For Attorneys

Contact Us

Our Hours

First Course Pre-Bankruptcy Credit Counseling

Hananwill Credit Counseling

115 N Cross

Robinson, IL 62454

Phone: 1-618-544-4640 Toll Free: 1-877-544-5560

Open web contact form

Second Course Pre-Discharge Debtor Education

Hananwill Financial Education Services

PO Box 415

Robinson, IL 62454

Phone: 1-618-544-5454 Toll Free: 1-866-544-5557

Open web contact form

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Go to website: www.summitfe.org



- ullet $\left(\$14.95 \right)$ (pick the cheapest option)
- When it asks you to upgrade click "no thanks"
- When you create an account enter "Gleason" for lawyers name
- AFTER YOU PAY FOR THE CLASS YOU MUST COMPLETE THE CHAT PORTION OF THE CLASS FOR A CERTIFICATE TO BE ISSUED. THE CLASS IS NOT OVER UNTIL YOU SEE YOUR CERTIFICATE.
- They will automatically send us a copy of the certificate.



- Take after getting a case number and before your bankruptcy hearing.
- \$9.95 (Pick cheapest option)
- Summit will automatically file the certificate with the court when you complete it and they will send us a copy
- If you do not complete the class your case will close at the end, without discharge, and the court charges \$260 to reopen it, file the certificate and receive a discharge.



Chapter 7 Bankruptcy Retainer Agreement

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER 7 BANKRUPTCY PETITION

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.

| THE EARNED FEE FOR THE PREPETITION SERVICE IS \$ | 865 | |
|---|-------------------|---------------------|
| FILING FEE OF \$_ | 335.00 | |
| TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$_ | 1200 | 00 |
| RETAINED WITH (CASH CHECK DEBIT MONEY ORDER) \$_ | 1200 | , o o |
| BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$ | · O_ | |
| AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WI AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$ | FOR POST FIL | ING LEGAL |
| CLIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UN INTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT OF ANY OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY LEGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON. | UNDERSTANDS THA | T THEY ARE HT TO |
| I UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON AND GLEASON AND GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNTEXPENSES OF GLEASON AND GLEASON. | | |
| LOCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITION, AND SUBSTITUTION OF COUNSEL | | |
| FAILURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVERTED FROM CHAPTER 13, WHE HAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE SERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER INTO SUCH AN AGREEMENT, THE COURT TO WITHDRAW FROM REPRESENTATION OF THE DEBTOR ON MOTION OF THE ATTORNEY. DATE 3 28 18 CLIENT CLIENT ATTORNEY | CASE TO PAY THE A | TTORNEY FOR |
| JOINT CLIENT | | |

77 W WASHINGTON, STE 1218 CHICAGO, IL 60602 | (312) 445-8825 | CHILAWYERS.COM | OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.